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# ADDITIONAL RESOURCES

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## PRINT PACK

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### CAP Youth Initiative Manual

Signs & Posters

Client Record

Agenda

Statistics Sheet

Client Survey

Program Evaluation

Website Checklist

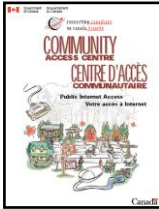


## SIGNS & POSTERS

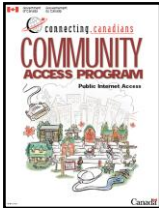
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Scattered throughout the "Youth Workers" section you will find several printable handouts to aid you in your term as a CAP Youth Worker.

Use the following links to access Industry Canada's official CAP sign and posters. Posters come in both French and English. If the links are out-of-date, copy and paste the thumbnail images into an MS Word document, expand image and print.



Community Access Centre Sign - English  
[http://cap.ic.gc.ca/pub/download/media/signsbil\\_en.pdf](http://cap.ic.gc.ca/pub/download/media/signsbil_en.pdf)

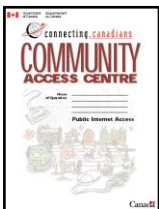


CAP Promotional Poster - English  
[http://cap.ic.gc.ca/pub/download/media/poster\\_en.pdf](http://cap.ic.gc.ca/pub/download/media/poster_en.pdf)

CAP



Promotional Poster – French  
[http://cap.ic.gc.ca/pub/download/media/poster\\_fr.pdf](http://cap.ic.gc.ca/pub/download/media/poster_fr.pdf)



CAP Hours of Operation – English  
[http://cap.ic.gc.ca/pub/download/media/signshrs\\_en.pdf](http://cap.ic.gc.ca/pub/download/media/signshrs_en.pdf)



CAP Hours of Operation – French  
[http://cap.ic.gc.ca/pub/download/media/signshrs\\_fr.pdf](http://cap.ic.gc.ca/pub/download/media/signshrs_fr.pdf)

# CLIENT REGISTRATION

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**Name:**

**Phone Number:**

**Address:**

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**Course Title (if applicable):**

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**Training:**

- ☐ Basic PC
  - ☐ Internet
  - ☐ MS Word
  - ☐ MS Excel
  - ☐ MS PowerPoint
  - ☐ Web Design
  - ☐ Other: \_\_\_\_\_
- 

**Client Type:**

- ☐ Business
  - ☐ Farming
  - ☐ Volunteer & Non-profit
  - ☐ Government
  - ☐ Schools & Libraries
  - ☐ Individual
  - ☐ Other: \_\_\_\_\_
- 

To be completed by staff

**Training Summary / Notes:**

From: \_\_\_\_\_

To: \_\_\_\_\_

Monday		Tuesday
Wednesday		Thursday
Friday		Saturday
Sunday		Notes

## CAP Centre Statistics

(submit your Impact Data Report by the 30/31st day of current month)

From: \_\_\_\_\_ 1st, 200\_\_ To: \_\_\_\_\_ 30/31st, 200\_\_

Site: \_\_\_\_\_ Password: \_\_\_\_\_

### SERVICES PROVIDED TO THE COMMUNITY (for all types of clients, including businesses)

- i. \_\_\_\_\_ No. of people visiting the CAP Centre (*if available...*)
- ii. \_\_\_\_\_ No. of computer/Internet training sessions held
- iii. \_\_\_\_\_ No. of people who received training
- iv. \_\_\_\_\_ No. of webpages developed as a result of contact with CAP Centre

### TYPE OF CLIENTS ASSISTED

- i. \_\_\_\_\_ Businesses (including agricultural)
- ii. \_\_\_\_\_ Farming Enterprises
- iii. \_\_\_\_\_ Volunteer and non-profit organizations
- iv. \_\_\_\_\_ Schools and libraries
- v. \_\_\_\_\_ Government agencies/Local government
- vi. \_\_\_\_\_ Individual residents
- vii. \_\_\_\_\_ Other, please specify

### SERVICES SPECIFICALLY FOR BUSINESS

- i. \_\_\_\_\_ No. of businesses contacted
- ii. \_\_\_\_\_ No. of business people who participated in training sessions
- iii. \_\_\_\_\_ No. of webpages developed as a result of the contact
- iv. \_\_\_\_\_ No. of businesses provided with information about e-commerce

### CYBERCAMP DATA

- i. \_\_\_\_\_ No. of camps/workshops delivered
- ii. \_\_\_\_\_ No. of people registered in all CyberCamps/Workshops
- iii. XXXX No. of camps/workshops conducted for the following groups:
  - \_\_\_\_\_ Children
  - \_\_\_\_\_ Teens
  - \_\_\_\_\_ Adults
  - \_\_\_\_\_ Seniors

### CAP Program Ideas

One-on-One Training Sessions

Group Training Sessions

Mini-Courses / Workshops

CyberCamps

Theme Days

Game Days

Back2Work Training Program

Online Scavenger Hunts

Online Book Clubs

Online Bridge Games / Tournaments

Online Tutorials

Create a VIRTUAL CAP Site

Volunteer Program

Professional Development / Staff Training

Educational/Tutoring Programs

ESL Program

Partnerships with Local Organizations

Start a CAP Newsletter

Design a CAP Website

# Client Survey

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Please answer the following questions...

1. **Gender:**    ☐ Male    ☐ Female    ☐ Undisclosed
  
2. **Age:**    ☐ 12 and Under    ☐ 13-17    ☐ 18-24    ☐ 25-34  
                 ☐ 35-44    ☐ 45-54    ☐ 55-64    ☐ 65-74  
                 ☐ 75-84    ☐ 85+    ☐ Undisclosed
  
3. **How did you hear about the CAP Centre?**  
☐ Friend/Colleague    ☐ Newspaper    ☐ Flyer/Poster  
☐ Other (Please specify): \_\_\_\_\_
  
4. **Would you recommend these training services to a friend/relative/colleague?**  
☐ Yes    ☐ No    ☐ Unsure
  
5. **Would you register for another training session?**  
☐ Yes    ☐ No    ☐ Unsure
  
6. **On average, how many hours (per week) do you use the Internet/Email at work and/or home (*select one only*)?**  
  
☐ 0 hours    ☐ 1-4 hours    ☐ 5-9 hours    ☐ 10-14 hours  
☐ 15-19 hours    ☐ Over 20 hours
  
7. **What level of education have you successfully completed (*You can select more than one*)?**  
  

<input type="checkbox"/> Some High School	<input type="checkbox"/> High School Diploma
<input type="checkbox"/> Some College	<input type="checkbox"/> College Certificate/Diploma
<input type="checkbox"/> Some University	<input type="checkbox"/> Undergraduate Degree
<input type="checkbox"/> Masters Degree	<input type="checkbox"/> Ph.D. <input type="checkbox"/> Undisclosed
  
8. **Why did you sign up for this course/training?**

# Program Evaluation

**Course Title:**

**Instructor:**

Rate the following:    **Excellent**    **Very Good**    **Good**    **Fair**    **Poor**

<b>General</b>					
Overall, the training/workshop was:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Overall, the registration and initial contact with instructor was:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The organization of the training/workshop was:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The facilities were:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<b>Instructor</b>					
The instructor was well prepared:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The instructor made objectives clear:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The instructor's skill in communicating information was:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The instructor's presentation of the material was understandable and enjoyable:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The instructor encouraged participation:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
The instructor provided help, if needed:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Overall, the instructor was:	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

*Continued...*

	Yes	Somewhat	No
<b>Training/Materials</b>			
Was the manual/material helpful?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Were the lesson sections paced correctly?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Did you gain new information and skills?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Were you satisfied with your learning experience?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Was the session too long?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Was the session too short?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Was the training too general?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Was the training too specialized?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

*Please answer the following questions:*

1. What did you like about the training/program/workshop?

2. What improvements would you suggest?

3. Additional comments and suggestions:

Thanks for your feedback!



## CHECKLIST FOR WEB PAGE DESIGN

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Below is a list of items that should be included on the website/web page for the CAP site:

- Name of the CAP Site
- Location
  - Address
  - Email Address
  - Telephone Number
  - Fax Number
  - Contact Person
- Brief Description / Background on CAP
- Description of the CAP Site
  - Brief History
  - Objectives (who we are, what we do)
- Hours of Operation
- Schedule, Services and Fees
  - Use of Internet
  - Printing
  - Scanning
  - Training/CyberCamp
  - Etc...
- Rules / Policies of the CAP Site
- List of Partners & Hyperlinks
- Date of the Last Update
- Name and Hyperlinks to the Hosting ISP
- Optional Items:
  - List of the People on the Board
  - Hyperlinks of Interest
  - City, Community or Municipality's Website
  - Other Community Programs
  - Info on Tourist Centre
  - Etc...

*Source: Community Access Program Youth Initiative:  
An Orientation Guide (<http://cap.ic.gc.ca/english/7401.shtml>)*